

## 2016 SURVIVORS INSURANCE RATES (without State funded benefits)

### SPOUSE ELIGIBLE FOR MEDICARE/CHILDREN ELIGIBLE FOR MEDICARE

COVERAGE LEVEL	SAVINGS	STANDARD	MEDICARE SUPP	TRICARE		DENTAL	DENTAL PLUS	VISION	TOBACCO SURCHARGE
SURVIVOR SPOUSE ONLY	N/A	439.78	457.78	N/A		11.72	TBD	7.00	40.00
SURVIVOR SPOUSE/CHILDREN	N/A	678.54	714.54	N/A		25.44	TBD	14.98	60.00
SURVIVOR CHILDREN ONLY	N/A	238.76	256.76**	N/A		13.72	TBD	7.98	40.00

### SPOUSE ELIGIBLE FOR MEDICARE/CHILDREN **NOT** ELIGIBLE FOR MEDICARE

COVERAGE LEVEL	SAVINGS	STANDARD	MEDICARE SUPP	TRICARE		DENTAL	DENTAL PLUS	VISION	TOBACCO SURCHARGE
SURVIVOR SPOUSE ONLY	N/A	439.78	457.78	N/A		11.72	TBD	7.00	40.00
SURVIVOR SPOUSE/CHILDREN	N/A	678.54	696.54	N/A		25.44	TBD	14.98	60.00
SURVIVOR CHILDREN ONLY	203.36	238.76	N/A	N/A		13.72	TBD	7.98	40.00

### SPOUSE **NOT** ELIGIBLE FOR MEDICARE/CHILDREN ELIGIBLE FOR MEDICARE

COVERAGE LEVEL	SAVINGS	STANDARD	MEDICARE SUPP	TRICARE		DENTAL	DENTAL PLUS	VISION	TOBACCO SURCHARGE
SURVIVOR SPOUSE ONLY	369.80	457.78	N/A	N/A		11.72	TBD	7.00	40.00
SURVIVOR SPOUSE/CHILDREN	573.16	696.54	714.54**	N/A		25.44	TBD	14.98	60.00
SURVIVOR CHILDREN ONLY	N/A	238.76	256.76**	N/A		13.72	TBD	7.98	40.00

### SPOUSE **NOT** ELIGIBLE FOR MEDICARE/CHILDREN **NOT** ELIGIBLE FOR MEDICARE

COVERAGE LEVEL	SAVINGS	STANDARD	MEDICARE SUPP	TRICARE		DENTAL	DENTAL PLUS	VISION	TOBACCO SURCHARGE
SURVIVOR SPOUSE ONLY	369.80	457.78	N/A	62.50		11.72	TBD	7.00	40.00
SURVIVOR SPOUSE/CHILDREN	573.16	696.54	N/A	121.50		25.44	TBD	14.98	60.00
SURVIVOR CHILDREN ONLY	203.36	238.76	N/A	61.00		13.72	TBD	7.98	40.00

\*\*THIS PREMIUM APPLIES ONLY IF ONE OR MORE CHILDREN ARE ELIGIBLE FOR MEDICARE.